



953 High Street, Victor, New York 14564 www.victorschools.org p 585.924.3252 f 585.742.7020

Karen Finter, *Assistant Superintendent for Instruction*

INDIVIDUALIZED HOME INSTRUCTION PLAN (IHIP Part 1)

GRADES 7-12

(Complete ONE form per student)

School Year _____

Name of Student: _____

Grade Level: _____ DOB: _____ Age: _____

Parents/ Guardians Name: _____

Address: _____

City, State, Zip Code: _____

Email Address: _____ Phone Number: _____

DATES FOR THE SUBMITTAL OF QUARTERLY REPORTS

Please enter the dates you wish to submit your quarterly reports below:

Suggested Month

First Quarter (November) _____

Second Quarter (January) _____

Third Quarter (April) _____

Fourth Quarter (June) _____

Projected Annual Assessment(s) _____ Narrative _____ Normal Assessment
(SAT, CAT, NYS Regents, Other)

Parent Signature

Date

*Please download and complete the forms. Email as an attachment.
Attach additional pages as necessary.*



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INDIVIDUALIZED HOME INSTRUCTION PLAN (IHIP- Part 2) GRADES 7-12

Required Subjects for Grades 7-12:

Required Subjects:	Units/ Credits	Plan/Materials —List textbook titles, curriculum, web addresses, or plans of instructions for each subject. Attach additional sheets as necessary.
English		
Geography/ History		
Science		
Math		
PE		
Health		
Art (.5)		
Music (.5)		
Electives:		
Notes:		